

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AM	100-123456789	
O.I.P.E. CLASSIFIER	NNI		
FORMALITY REVIEW	TC	100-123456789	
RESPONSE FORMALITY REVIEW	CGS	573	03-24-00

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)...	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	1-2-01
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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